## PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail Mail Stop ISSUE FEE

Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450

or Fax (571)-273-2885

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications.

CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)

**NATH & ASSOCIATES PLLC** 112 South West Street Alexandria, VA 22314



Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.

Certificate of Mailing or Transmission

I hereby certify that this Fee(s) Transmittal is being deposited with the Unite
States Postal Service with sufficient postage for first class mail in an envelop
addressed to the Mail Stop ISSUE FEE address above, or being facsimil
transmitted to the USPTO (571) 273-2885, on the date indicated below.

		SLI TO	الإ			(Depositor's name)	
		A STATE OF THE STA				(Signature)	
		G TRADEN				(Date)	
APPLICATION NO.	FILING DATE		FIRST NAMED INVENTOR	A	TTORNEY DOCKET NO.	CONFIRMATION NO.	
10/509,396 TITLE OF INVENTION	09/24/2004 I:		Wolf-Ruediger ULRICH	1	26297	5819	
		<del>,</del>				T	
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE F	EE TOTAL FEE(S) DUE	DATE DUE	
nonprovisional	NO	\$1400	\$300	\$0	\$1700	10/12/2006	
EXAMINER ART UNIT		CLASS-SUBCLASS	]				
Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).      Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.      □ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.			(1) the names of up to or agents OR, alternation	a single firm (having as a member a ley or agent) and the names of up to ent attorneys or agents. If no name is 3. Shelden M. McCoo.			
PLEASE NOTE: Un recordation as set fort (A) NAME OF ASSI ALTANA PHARMA A	less an assignee is ident h in 37 CFR 3.11. Comp GNEE IG	ified below, no assignee pletion of this form is NO	(B) RESIDENCE: (CITY Konstanz, GERMANY	atent. If an assignee assignment. and STATEORO 01 FC:1501	is identified below, the do	1400.00 OP 300.00 OP	
			<ul> <li>D. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above)</li> <li>✓ A check is enclosed.</li> <li>✓ Payment by credit card. Form PTO-2038 is attached.</li> <li>✓ The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 14-0112 (enclose an extra copy of this form).</li> </ul>				
	s SMALL ENTITY state	is. See 37 CFR 1.27.			ENTITY status. See 37 CF red attorney or agent; or the		
Authorized Signature			Date September 15, 2006				
Typed or printed nam	e Sheldon M. McSee		Registration No. <u>50,454</u>				

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.



MAIL STOP - ISSUE FEE

Attorney Docket No.: 26297

## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of:

Art Unit: 1625

ULRICH, Wolf-Rüdiger

Examiner: Davis, Z.

Application No.: 10/509,396

Confirmation No.: 5819

Filed: September 24, 2004

Title: NOVEL ALKOXYPYRIDINE-DERIVATIVES

## TRANSMITTAL LETTER

Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

## Sir:

Submitted herewith for filing in the U.S. Patent and Trademark Office is the following:

- Part B-Issue Fee Transmittal;
- 2) Check No.: **2852** in the Amount of **\$ 1,709.00** for Issue (\$1,400), Publication (\$300), and Advanced Ordered Copies (\$9) Fee Payments as a **Large Entity**.

The Commissioner is hereby authorized to charge any deficiency or credit any excess to Deposit Account Number 14-0112.

Respectfully submitted, NATH & ASSOCIATES PLLC

September 15, 2006

By:

Gary M. Nath, Reg. No. 26,965

Sheldon M. McGee, Reg. No. 50,454

Customer No. 20529

Le